

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90367 050 ***150.00

DOCUMENT # P29701

1. Entity Name
HOOSIER FACTORIES INCORPORATED



Principal Place of Business
**5000 SOUTH OHIO ST.
MICHIGAN CITY, IN 46360**

Mailing Address
**C/O HARTMARX
101 N WACKER, STE. 2300
CHICAGO, IL 60606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04062006

Chg-P

CR2E034 (11/05)

4. FEI Number

35-1103970

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME BIEGEL, RICHARD L
STREET ADDRESS 101 NORTH WACKER DRIVE SUITE 2300
CITY-ST-ZIP CHICAGO, IL 60606

TITLE VP ☐ Delete
NAME KLINK, DONALD K.
STREET ADDRESS 101 N. WACKER DRIVE, SUITE 2200
CITY-ST-ZIP CHICAGO, IL 60606

TITLE VD ☐ Delete
NAME MORGAN, GLEN R
STREET ADDRESS 101 N WACKER DR
CITY-ST-ZIP CHICAGO, IL

TITLE D ☐ Delete
NAME ZAHR, ANDREW A
STREET ADDRESS 101 N. WACKER DR.
CITY-ST-ZIP CHICAGO, IL 60606

TITLE SD ☐ Delete
NAME PROCZKO, TARAS R
STREET ADDRESS 101 N WACKER DR
CITY-ST-ZIP CHICAGO, IL

TITLE T ☐ Delete
NAME JOHNSON, JUNE M.
STREET ADDRESS 101 N. WACKER DRIVE
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Change ☐ Addition
NAME Zahr, Andrew A
STREET ADDRESS 101 N. Wacker Dr
CITY-ST-ZIP Chicago, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Taras R. Proczko
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Taras R. Proczko, Secretary 4/7/06

312.357.5321

Date

Daytime Phone #